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CONFIRMATION NO. 3455

<b>SERIAL NUMBER</b> 10/586,839	<b>FILING OR 371(c) DATE</b> 07/20/2006 <b>RULE</b>	<b>CLASS</b> 351	<b>GROUP ART UNIT</b> 2873	<b>ATTORNEY DOCKET NO.</b> 1606.75588
<b>APPLICANTS</b> Francois Lacombe, Chaville, FRANCE; David Lafaille, Meudon, FRANCE; Marie Glanc, Meudon, FRANCE; Eric Gendron, Meudon, FRANCE; Douchane Stefanovitch, Meudon, FRANCE;				
<b>** CONTINUING DATA *****</b> This application is a 371 of PCT/FR05/00133 01/21/2005 <b>** FOREIGN APPLICATIONS *****</b> FRANCE 0400581 01/22/2004				
<b>IF REQUIRED, FOREIGN FILING LICENSE GRANTED</b> <b>** 03/27/2007</b>				
Foreign Priority claimed <input checked="" type="checkbox"/> yes <input type="checkbox"/> no 35 USC 119 (a-d) conditions <input checked="" type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after met Allowance <u>11.4</u> Verified and Acknowledged <u>11.4</u> Examiner's Signature Initials		<b>STATE OR COUNTRY</b> FRANCE	<b>SHEETS DRAWING</b> 3	<b>TOTAL CLAIMS</b> 18
		<b>INDEPENDENT CLAIMS</b> 2		
<b>ADDRESS</b> 24978				
<b>TITLE</b> Eye examination device by means of tomography with a sighting device				
<b>FILING FEE RECEIVED</b> 900	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit	